

# I/DD Program Bulletin



Lunch and Learn Calls for **consumers, advocates** and other **stakeholders** are every other Wednesday at 12:00 p.m.

Email questions to:  
[kancare.ombudsman@kdads.ks.gov](mailto:kancare.ombudsman@kdads.ks.gov)

The IDD Program Bulletin is now being published once every two weeks.

The next edition will be distributed on May 23rd.

Lunch and Learn Calls for providers will be held every other week, on Monday's from 11:00 a.m. to 12:00 p.m.

Email questions to:  
[providerforum@kdads.ks.gov](mailto:providerforum@kdads.ks.gov)

## Bulletin Update for May 9, 2014

- ✚ Web Application Speed Issue Update
- ✚ HCBS Final Rule – Provider Assessment (online survey)
- ✚ Financial Management Services (FMS) Information
- ✚ Updated Information on AuthentiCare Authorizations
- ✚ Updates for Lunch and Learn Calls
- ✚ Crisis Request for Program Access

**Web Applications Speed Issue Update:** We are still troubleshooting the cause of and possible solutions to the speed issues that internal staff and external partners. We have both internal staff and several external partners continually working on this problem. The speed issue is affecting both users inside and outside of the KDADS network, and we want all users to know that we understand your frustration and how this is affecting your work. Thank you for your continued patience and understanding as we continue work to resolve this issue.

**HCBS Final Rule – Provider Assessment (online survey):** On March 17, 2014, the CMS Final Rule on home and community based settings for HCBS services became effective. The rule applies to all 1915(c) waivers and defines settings based on the individual's experience and opportunities in residential and nonresidential settings that are controlled, owned, and operated by a provider of HCBS services.

**The CMS Final Rule on HCBS Settings is available at the link below.**

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Home-and-Community-Based-Services.html>

The CMS Final Rule on HCBS Settings requires all states to develop a transition plan to ensure compliance with the new definitions in the rules. The Transition Plan will be submitted to CMS in early August 2014. Over the next two months, KDADS will be holding public sessions for consumers, providers and stakeholders to provide input. The draft Transition Plan will be posted online, and public comment and feedback will be gathered and summarized for review.

**Public Comment and Input Sessions will be held the week of June 9th**

To ensure compliance with the new rules, KDADS is requesting all providers who own, operate and control settings to complete one (1) survey for every setting type that they own, operate and control. The setting types (listed below) will be assessed and the information gathered through this survey will be used to develop and update the Transition Plan. Please answer the questions with the type of activities that are “typical” of the setting type. Comments can be added to the end of the survey if you would like to provide additional information and pose questions for future follow up.

### **Find out if your setting is compliant with the CMS Final Rule on HCBS Settings**

**Providers can complete the Provider Assessment online - [Click here to take the HCBS Settings Assessment survey](#)**

The survey is designed so that it must be completed for each setting type individually (i.e., if you own, operate or control more than one setting type, you must take the survey for each one). Once you complete the survey, you can start over and complete a different survey for a different setting type. **A separate assessment should be completed for Residential Support and Day Support services.**

Questions related to the survey and transition plan can be sent to [HCBS-KS@kdads.ks.gov](mailto:HCBS-KS@kdads.ks.gov). Additional information about the survey will be provided on Monday, May 19th, during the Provider Lunch and Learn session and on Tuesday, May 20th, during the HCBS Provider Forum. Please register to attend and submit questions to KDADS at [HCBS-KS@kdads.ks.gov](mailto:HCBS-KS@kdads.ks.gov).

**Financial Management Services (FMS) Information:** A final updated list of FMS providers who have met FMS requirements and have a current agreement with KDADS will be published on this website the first week of June 2014, the final can located at: [http://www.aging.ks.gov/HCBSProvider/FMS\\_Provider.html](http://www.aging.ks.gov/HCBSProvider/FMS_Provider.html)

An FMS provider must renew their agreement with KDADS annually; a new agreement will be available for download by October 1, 2014. In order for KDADS to reestablish an FMS agreement with a provider, the FMS provider must comply with all requirements as specified in the FMS provider manual on KMAP at: [https://www.kmap-state-ks.us/Documents/Content/Provider%20Manuals/HCBS%20FMS\\_04142014\\_14047.pdf](https://www.kmap-state-ks.us/Documents/Content/Provider%20Manuals/HCBS%20FMS_04142014_14047.pdf)

### **Updated Information on AuthentiCare Authorizations:**

AuthentiCare® authorizations completed by MMIS Plan of Care approvals without the March 31, 2014 end date, and authorizations submitted by MCOs, have created duplicate authorizations in AuthentiCare for a number of providers. Claims confirmed by providers in AuthentiCare “pend” against the first authorization received.

Duplicate authorizations do not generally create a payment issue for providers unless the second and all subsequent authorization for the same dates of service has a different number of units than is captured on the first authorization received. If that is the case, providers should contact [AuthentiCare.Support@firstdata.com](mailto:AuthentiCare.Support@firstdata.com) and/or [Grant.McKay@firstdata.com](mailto:Grant.McKay@firstdata.com) and [Candace.Cobb@firstdata.com](mailto:Candace.Cobb@firstdata.com) to report the duplication issue, the name of the MCO involved, and a list of clients for whom units need adjusted, and the details of the adjustment. First Data staff will then communicate with the MCO on behalf of the provider to verify and correct authorizations.

Providers do not have access to delete duplicate authorizations. First Data staff can delete *future* duplicate authorizations, but cannot delete authorizations that have had a claim “pending” against them. Providers should check their May, 2014 and ongoing authorizations if they wish for First Data staff to delete those future duplicate authorizations.

The natural workflow for provider-confirmed claims is that they export from AuthentiCare Kansas to HP, who then forwards claims to the applicable MCO. Though the authorizations created by MMIS Plans of Care do have KMAP as payer, the provider-confirmed claims still follow the natural workflow of export to HP who then forwards those claims to the applicable MCO for adjudication.

*Additional information about progress on this topic will be provided in the next bulletin.*

## Provider Calls:

Registration for the calls is required (and must be completed by the day prior to the call). Registration can be completed online at: [http://www.kdads.ks.gov/CSP/IDD/KanCare\\_Imp/IDD\\_Implementation\\_Calendar.html](http://www.kdads.ks.gov/CSP/IDD/KanCare_Imp/IDD_Implementation_Calendar.html)

- ✚ **Providers:** Calls are scheduled for every other Monday. The next call will be on Monday, May 19th, followed by another call on June 2<sup>nd</sup>. Friday calls have been discontinued at this time. Callers may continue to submit questions to [PROVIDERFORUM@kdads.ks.gov](mailto:PROVIDERFORUM@kdads.ks.gov). If you experience difficulty registering for the Lunch and Learn calls you may also register by sending your name in an email to [providerforum@kdads.ks.gov](mailto:providerforum@kdads.ks.gov).

✚ **Call in Number: 1.866.620.7326**

✚ **Conference Code: 4283583031**

- ✚ **Lunch and Learn Calls for Consumers and Other Stakeholders:** Calls will continue on every other Wednesday from 12:00 to 1:00 for consumers and family members. The next call will be held on Wednesday, May 21st followed by another call on June 4th. Callers may submit questions to [kancare.ombudsman@kdads.ks.gov](mailto:kancare.ombudsman@kdads.ks.gov). If a consumer has problems registering for the Lunch and Learn call, they could email the KanCare Ombudsman at [kancare.ombudsman@kdads.ks.gov](mailto:kancare.ombudsman@kdads.ks.gov).

✚ **Call in Number: 1.866.620.7326**

✚ **Conference Code: 4283583031**

- ✚ **Providers:** Calls are scheduled for **every third Tuesday of the month**. The next call will be on Tuesday, May 19th, followed by another call on June 17th. Callers may submit HCBS Forum questions to [PROVIDERFORUM@kdads.ks.gov](mailto:PROVIDERFORUM@kdads.ks.gov). If you experience difficulty registering for the Lunch and Learn calls you may also register by sending your name in an email to [providerforum@kdads.ks.gov](mailto:providerforum@kdads.ks.gov).

✚ **Call in Number: 1.866.620.7326**

✚ **Conference Code: 4283583031**

- ✚ **Calls with Targeted Case Managers:** Calls with Targeted Case Managers will not be held for the remainder of the month of May. The next call will be on June 3rd from 3:00 pm to 4:00 pm.

✚ **Call in Number: 1.866.620.7326**

✚ **Conference Code: 2850444124**

- ✚ **Calls with CDDOs:** Calls with CDDO Directors are held every other Thursday from 11:00 am to 12:00 pm. The next call with Directors has been scheduled for Thursday, May 22<sup>nd</sup>.

✚ **Call in Number: 1.866.620.7326**

✚ **Conference Code: 4283583031**

## **Crisis Request for Program Access:**

- Effective May 19, 2014, Sandra Andrews will be coordinating all crisis requests for IDD and PD program admissions. To expedite the process and improve efficiencies, please submit all requests to Sandra at [hcbs-ks@kdads.ks.gov](mailto:hcbs-ks@kdads.ks.gov) with “**IDD Crisis Access Request**” in the subject line.
- Sandra will intake all requests and prioritizes reviews based on the date of submission. If additional information is necessary, Sandra will contact the submitting organization for additional information or schedule a crisis review conference with the submitting organization within 3 business days of receipt of the request.
- For the IDD program, a notice of action approving or denying the request will be sent to the consumer with a copy to the submitting organization, the consumer’s targeted case manager and the consumer’s managed care health plan when applicable. KDADS will send a 3160 to DCF authorizing access to services.
- Access to service will not be approved retroactively, if the request is emergent, the submitting organization will need to request an expedited review via conferencing to Sandra Andrews.
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